# GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

# LOK SABHA UNSTARRED QUESTION NO. 2986 TO BE ANSWERED ON 3<sup>rd</sup> AUGUST, 2018

### NATIONAL HEALTH RESOURCE REPOSITORY

### 2986. KUMARI SHOBHA KARANDLAJE:

# Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether the Government has released the National Health Resource Repository (NHRR) and if so, the details thereof;
- (b) the objectives and outcomes of the NHRR project; and
- (c) whether the Government has initiated universal screening of common Non Communicable Diseases (NCDs) such as diabetes, hypertension, common cancers, tuberculosis and leprosy and if so, the details thereof?

# ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. ANUPRIYA PATEL)

(a) & (b): No. The nationwide Census under National Health Resources Repository (NHRR) project of all healthcare establishments, both public and private has been launched on 19<sup>th</sup> June, 2018. The objectives and outcomes of NHRR project are given below:-

## Objectives:-

- i. Promote evidence based planning and decision making in healthcare sector through provision of comprehensive data on healthcare resources (both public and private sector) in the country.
- ii. Provide visibility of private sector healthcare resources to facilitate public private partnership initiatives for improve access and availability of health services
- iii. Provide technology based solutions to improve efficiency of health systems by improving planning, provisioning of healthcare resources
- iv. Improve informed decision making and community awareness by allowing access to holistic information on healthcare resources.
- v. Promote meaningful use of data collection and exchange services for better healthcare management by providing a common platform for sharing information.
- vi. Promote convergence between similar programmes by providing interoperability
- vii. Enhance effectiveness of programme planning and implementation at centre, state and district level by providing updated healthcare resource status.

- viii. Provide a platform for managing emergencies effectively by providing information on all the healthcare resources (public & private) in the designated geography.
- ix. Furnish standardized data, distribution of resources and trends on the global platform, using regularly updated health status indicators.

### Outcomes:-

- i. Access to comprehensive and standardized information of both private and public health resources at a single platform on digitized maps
- ii. Detailed public health facilities information about health resources: availability of services, doctors specialized in different fields, equipment and medicines etc.
- iii. Enable real-time data accessibility to all stakeholders
- iv. Visibility to private sector health resource information-Targeted private sector participation for better healthcare service delivery
- v. Provide concrete inputs to States in developing evidence based PIPs to strengthen public health management and service delivery
- vi. Creates transparency and establishes an accountability mechanism for effective centre-to-state health care funding
- vii. Real world evidence based health resources planning, allocation, monitoring and performance assessment ensuring resource allocation are optimized
- viii. Better co-ordination between state and Central government on utilization of resources
- ix. Improve government's efforts to provide access to quality healthcare right up to the remotest regions to maximize impact for populations in need
- x. ICT enabled targeted information dissemination to public for improved health access.
- xi. Surveillance: Enhanced response mechanisms to tackle disease threats. Enables mass outreach campaign to doctors, hospitals, chemists, etc. especially useful during the time of disaster management.
- xii. Ties with the Digital India Vision of easily accessible platform for information on healthcare service delivery.
- (c): For early diagnosis, population level screening for common Non Communicable Diseases (NCDs) has been initiated in over 150 districts. Leprosy and Tuberculosis have also been included in the Community Based Assessment Checklist.